



Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

May 27, 2009

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Sunvalley Bar & Grill, 300 West 'P' Street requesting a class C liquor license.

Todd Pfundt has purchased this business, which currently holds a liquor license. Mr. Pfundt has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Todd Pfundt was born in Cedar Rapids, Iowa. He attended Lincoln High School graduating in 1988

Mr. Pfundt has been employed at the business since 1998.

The required training will be completed on June 11th 2009.

A criminal history has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency





LINCOLN POLICE DEPARTMENT PUBLIC RECORD CRIMINAL HISTORY

This is a list of criminal citations and arrests by the Lincoln Police Department for this person since 1980.

- Arrests or citations by any other law enforcement agency are not included.
- Arrests where no charges were filed are only included during the most recent year.
- Charges that were sent to diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

If the phrase "****END OF LISTING****" does not appear at the bottom of this report, then this list is not complete.

FOR: TODD PAUL PFUNDT , Male, DOB:

Date of listing: 05-20-2009

CODES FOR CRIMINAL HISTORY (I)=Infraction(M)=Misdemeanor(F)=Felony(O)=Other

Cited on 08-31-2005	for (M)DRIVING UNDER INFLUENCE/.08, SECOND OFFEN	Case A5-096499
Disposed 04-14-2006	as (M)DRIVING UNDER INFLUENCE/.08, SECOND OFFEN	Cit# LA988335
FOUND GUILTY Fined \$500.00 & Sentenced 30 DAYS		
02 YRS PROB		
Cited on 04-05-2001	for (M)DRIVING UNDER INFLUENCE, FIRST OFFENSE	Case A1-034262
Disposed 10-26-2001	as (M)DRIVING UNDER INFLUENCE, FIRST OFFENSE	Cit# LA751689
FOUND GUILTY Fined \$500.00 & Sentenced 7 DAYS		
Cited on 10-18-1996	for (M)PHONE CALL - INTIMIDATE/HARASS/OFFEND	Case 96-120199
Disposed 03-14-1997	as (M)DISTURBING THE PEACE	Cit# LA5204216
FOUND GUILTY Fined \$200.00		
Cited on 01-25-1996	for (M)3RD DEG ASSAULT	Case 96-008490
Disposed 08-29-1996	as (M)ASSAULT, STRIKE OR CAUSE BODILY INJURY	Cit# LA484867
FOUND GUILTY Fined \$250.00		
Cited on 07-10-1988	for (M)LIQUOR MINOR IN POSSESSION	Case 88-058290

Disposed 09-21-1988	as (M)LIQUOR MINOR IN POSSESSION	Cit# LA117433
FOUND GUILTY Fined \$100.00		

*** END OF LISTING ***

APPLICATION FOR LIQUOR LICENSE

301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov/

45 days = 7-2-2009

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NEBRASKA LIQUOR
CONTROL COMMISSION

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES CHECK DESIRED CLASS(S)

RETAIL LICENSE(S)

		Application Fee
<input type="checkbox"/>	A BEER, ON SALE ONLY	\$45.00
<input type="checkbox"/>	B BEER, OFF SALE ONLY	\$45.00
<input checked="" type="checkbox"/>	C BEER, WINE & DISTILLED SPIRITS, ON & OFF SALE	\$45.00
<input type="checkbox"/>	D BEER, WINE & DISTILLED SPIRITS, OFF SALE ONLY	\$45.00
<input type="checkbox"/>	I BEER, WINE & DISTILLED SPIRITS, ON SALE ONLY	\$45.00
<input type="checkbox"/>	Class K Catering license (requires catering application form)	\$100.00

MISCELLANEOUS

		Application Fee	Bond Required
<input type="checkbox"/>	L Craft Brewery (Brew Pub)	\$295.00	\$1,000 minimum
<input type="checkbox"/>	O Boat	\$ 95.00	none
<input type="checkbox"/>	V Manufacturer		
<input type="checkbox"/>	Alcohol & Spirits	\$1,045.00	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$145.00 1 to 100 barrel*	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$245.00 100 to 150 barrel*	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$395.00 150 to 200 barrel*	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$545.00 200 to 300 barrel*	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$695.00 300 to 400 barrel*	\$1,000 minimum
<input type="checkbox"/>	Beer (excluding produced by a craft brewery)	\$745.00 400 to 500 barrel*	\$1,000 minimum
<input type="checkbox"/>	W Wholesale Beer	\$545.00	\$5,000 minimum
<input type="checkbox"/>	X Wholesale Liquor	\$795.00	\$5,000 minimum
<input type="checkbox"/>	Y Farm Winery	\$295.00	\$1,000 minimum
<input type="checkbox"/>	Z Micro Distillery	\$295.00	\$1,000 minimum

☐ Copy of TTB permit (if applying for L, V, W, X, Y or Z)

*daily capacity, average daily barrel production for the previous twelve months of manufacturing operation. If no such basis for comparison exists, the manufacturing licensee shall pay in advance for the first year's operation a fee of five hundred dollars

All Class C licenses expire October 31st

All other licenses expire April 30th

Catering license (K) expires same as underlying retail license

TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

- ☒ Individual License (requires insert form 1)
☐ Partnership License (requires insert form 2)
☐ Corporate License (requires insert form 3a & 3c)
☐ Limited Liability Company (requires form 3b & 3c)

NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(commission will call this person with any questions we may have on this application)

Name Todd P. FORD Phone number: 402-817-8131

Firm Name Sunvalley Bar and Grill 300 W. "P." St 68528

PREMISE INFORMATION

Trade Name (doing business as) Sunvalley Bar & Grill

Street Address #1 300 W. "P" St.

Street Address #2 _____

City Lincoln County Lancaster Zip Code 68528

Premise Telephone number 402-477-7112

Is this location inside the city/village corporate limits: ☒ YES ☐ NO

Mail address (where you want receipt of mail from the commission)

Name Same

Street Address #1 _____

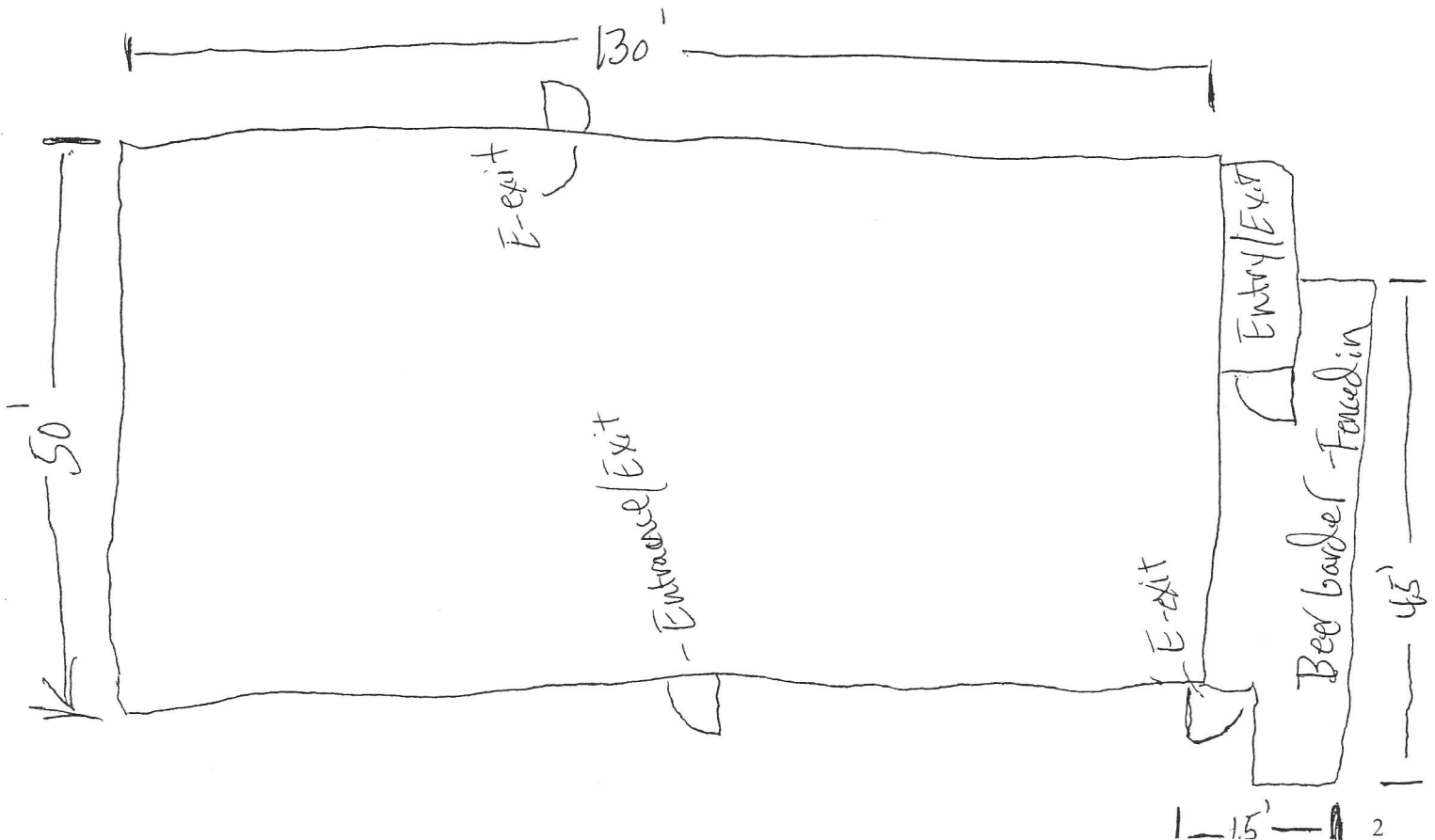
Street Address #2 _____

City _____ State _____ Zip Code _____

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

**For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms



APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☒ YES ☐ NO

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If yes, please explain below or attach a separate page.

Traffic Violation
DUI - 2006

NEBRASKA LIQUOR
CONTROL COMMISSION

2. Are you buying the business and/or assets of a licensee?

☒ YES ☐ NO

If yes, give name of business and license number 42613 PLP LLC

a) Submit a copy of the sales agreement including a list of the furniture, fixtures and equipment.

b) Include a list of alcohol being purchased, list the name brand, container size and how many?

3. Are you filing a temporary agency agreement whereby current licensee allows you to operate on their license?

☐ YES ☒ NO

If yes, attach temporary agency agreement form and signature card from the bank.

This agreement is not effective until you receive your three (3) digit ID number from the Commission.

4. Are you borrowing any money from any source to establish and/or operate the business?

☐ YES ☒ NO

If yes, list the lender _____

5. Will any person or entity other than applicant be entitled to a share of the profits of this business?

☐ YES ☒ NO

If yes, explain. All involved persons must be disclosed on application. _____

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

☐ YES ☒ NO

If yes, list such items and the owner. _____

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business?

☐ YES ☒ NO

If yes, explain. _____

No silent partners

8. Are your premises to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 feet of a college or university campus?

☐ YES ☒ NO

If yes, list the name of such institution and where it is located in relation to the premises (Neb. Rev. Stat. 53-177)

9. Is anyone listed on this application a law enforcement officer?

☐ YES ☒ NO

If yes, list the person, the law enforcement agency involved and the person's exact duties.

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or withdrawals on accounts at the institution.

West Gate Bank Todd P. Pfundt

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reason for termination of any license(s) previously held.

None

12. List the training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:

- a) Individual, applicant only (no spouse)
- b) Partnership, all partners (no spouses)
- c) Corporation, manager only (no spouse)
- d) Limited Liability Company, manager only (no spouse)

Name:	Date:	Where:
Sunvalley Bar & Grill	Current	
13 th Ave. Bar & Grill	1996-1998	
Hylander Bar	on/off 1996	

13. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

- ☐ Lease: expiration date _____
- ☐ Deed _____
- ☐ Purchase Agreement _____

14. When do you intend to open for business?

ASAP

15. What will be the main nature of business?

on/off sale

16. What are the anticipated hours of operation?

Mon - Sun 10:00 A.M - 1:00 A.M M-F Sun 12:00-1:00

17. List the principal residence(s) for the past 10 years for all persons required to sign, including spouses. If necessary attach a separate sheet.

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

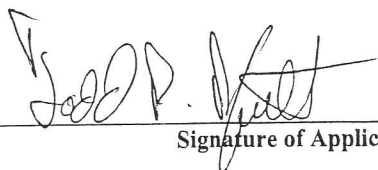
APPLICANT: CITY & STATE	YEAR FROM TO	SPOUSE: CITY & STATE	YEAR FROM TO
Todd P. Pfundt - 2631 SW 19 th	2004	Current	
1224 W. Park Ave	1999	2004	

The undersigned applicant(s) hereby consent(s) to an investigation of his/her background investigation and release present and future records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation of any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock and spouses), full (birth) names only, no initials.

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Signature of Applicant

Signature of Spouse

Signature of Applicant

Signature of Spouse

Signature of Applicant

Signature of Spouse

Signature of Applicant

Signature of Spouse

Signature of Applicant

Signature of Spouse

State of Nebraska

County of Lancaster

County of _____

The foregoing instrument was acknowledged before me this 7th day of May, 2009 by

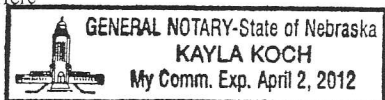
The foregoing instrument was acknowledged before me this _____ by

Todd Pfundt

Kayla Koch
Notary Public signature

Notary Public signature

Affix Seal Here



Affix Seal Here

in compliance with the ADA, this manager insert form 3c is available in other formats for persons with disabilities. A ten day advance period is required in writing to produce the alternate format.

**APPLICATION FOR LIQUOR LICENSE
INDIVIDUAL
INSERT - FORM 1**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

Office Use

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NEBRASKA LIQUOR
CONTROL COMMISSION

Individual applicants, including spouse, are required to adhere to the following requirements

- 1) **Must be a citizen of the United States**
- 2) **Must be a Nebraska resident (Chapter 2 - 006)**
- 3) **Must provide a copy of their certified birth certificate or INS papers**
- 4) **Must submit their fingerprints (2 cards per person)**
- 5) **Must sign the signature page of the Application for License form**
- 6) **Applicant may be required to take a training course**

Name of individual applicant who will hold license

Last Name:

PFOND

First Name:

TODD

MI:

P

Home Address:

2631 SW 19th

City:

Lincoln

Zip Code:

68522

Social Security Number:

Date of Birth:

Home Telephone Number:

402-817-8131

Drivers License Number:

State:

NE

Are you married? (Please note if the above listed individual is separated, etc. spouse's information is still required to be listed below)

☐ YES

☒ NO

If yes, provide your spouse's information below

Spouses Last Name:

Spouses First Name:

MI:

Social Security Number:

Date of Birth:

Drivers License Number:

State:

In compliance with the ADA, this individual insert form 1 is available in other formats for person with disabilities.
A ten day advance period is required in writing to produce the alternate format.

FORM 35-4182
REVISED 05/2007

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NEBRASKA LIQUOR
CONTROL COMMISSION

STATE OF IOWA
CERTIFICATION OF VITAL RECORD

STATE OF IOWA

182

STATE OF IOWA
DEPARTMENT OF HEALTH
CERTIFICATE OF LIVE BIRTH

114- 70-001782
BIRTH NUMBER

CHILD—NAME 1 Todd Paul Pfundt			DATE OF BIRTH (MONTH, DAY, YEAR) 7c		HOUR CST 7:20P
SEX 2 Boy	THIS BIRTH—SINGLE, TWIN, TRIPLET, ETC (SPECIFY) 4a Single	IF NOT SINGLE BIRTH—BORN FIRST, SECOND, THIRD, ETC (SPECIFY) 4b	COUNTY OF BIRTH 5a Linn		
CITY, TOWN, OR LOCATION OF BIRTH 5b Cedar Rapids		INSIDE CITY LIMITS (SPECIFY YES OR NO) 5c yes	HOSPITAL—NAME (IF NOT IN HOSPITAL, GIVE STREET AND NUMBER) 5d St. Lukes Methodist Hospital		
MOTHER—MAIDEN NAME 6a Laura Gail Portsche			AGE (AT TIME OF THIS BIRTH) 6b 22	STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) 6c Nebraska	
RESIDENCE—STATE 7a Iowa	COUNTY 7b Linn	CITY, TOWN, OR LOCATION 7c Cedar Rapids	INSIDE CITY LIMITS (SPECIFY YES OR NO) 7d yes	STREET AND NUMBER 7e 3604 Houston St. NE	
FATHER—NAME 8a Paul Theodore Pfundt			AGE (AT TIME OF THIS BIRTH) 8b 23	STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) 8c New Jersey	
INFORMANT 9a Laura Pfundt			RELATION TO CHILD 9b Mother		
I CERTIFY THAT THE ABOVE NAMED CHILD WAS BORN ALIVE AT THE PLACE AND TIME AND ON THE DATE STATED ABOVE			DATE SIGNED (MONTH, DAY, YEAR) 10a January 17, 1970	ATTENDANT—M.D., D.O., MIDWIFE, OTHER (SPECIFY) 10c M. D.	
10b SIGNATURE— <i>[Signature]</i> CERTIFIER—NAME (TYPE OR PRINT)			MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP) 10d Cedar Rapids, Iowa		
10d Dr. R. G. Bausch					
REGISTRAR—SIGNATURE 11a <i>[Signature]</i>			188	DATE RECEIVED BY LOCAL REGISTRAR MONTH DAY YEAR 11b February 3, 1970	

This is to certify that this is a true and correct reproduction of the original record as recorded in this office, issued under authority of Chapter 144, Code of Iowa.
This copy not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

MAY 05 2009

DATE ISSUED
S1142667

Chester J. Culver
GOVERNOR, STATE OF IOWA
Patty Judge, Lt. Governor

[Signature]
DEPUTY STATE REGISTRAR

FORM #588-03285 (10/2007) WARNING: IT IS ILLEGAL TO DUPLICATE THIS COPY

